(Caption of Case)

STATE OF SOUTH CAROLINA

John Doe dba Doe's Limo

Example: Application for a Class C Charter Certificate from

303

-
BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

	TRANSPORTATION COVER SHEET
Application for Class C } Charter Gorby's of }	DOCKET NUMBER: 2010 - 81 - T
MyrHe Beach LLC	If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.
Please type or print) Bubmitted by: Hasie Gorby	Telephone: 843-907-0271
Address: 100 Red Wolf Trail	Fax:
Myrtle Beach SC29579	Other:
	Email: Kasie Olah @ Yahocom
NOTE: The cover sheet and information contained herein neither replace is required by law. This form is required for use by the Public Service Core filled out completely.	s nor supplements the filing and service of pleadings or other papers commission of South Carolina for the purpose of docketing and must
NATURE OF ACTION	(Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency	Request
Application - Class C Stretcher Van	Exhibit
Application - Class E Household Goods Application - Class E Hazardous Waste Application Application	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application CARTON	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate	Reservation Letter
of Public Convenience and Necessity to be Rescinded	Response
Request for Cancellation of Certificate	Return to Petition
Request for Suspension	Other:
Request for Reinstatement	
·	

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

p.1



PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

г	Date: 2-25-10
CLASS C - CHARTER	
•	
Application is hereby made for a Certificate of Public Convenience and of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto	
1. Name under which business is to be conducted (corporation, partnership, or	or sole proprietorship, with or without trade name
Gorbys of Myrtle Beach, LLC	
100 Red Wolf Trail My He Ber Street Address of Applica	
Mailing Address of Applicant if different if	from street address
Tital c	Fax
Hasicolah @ yahoo com Email Address	
2. If incorporated, a copy of Articles of Incorporation must be attached Secretary of State "Foreign Corporation" Certificate.)	d. (If incorporated outside of SC, attach SC
3. Select Entity Type: (Check one)	
☐ Individual Owner/Sole Proprietorship	
Partnership - List names and address of all person having an in	
Corporation - List names and addresses of two principal officer	rs.
hasie Garby - President	
Boger Gorby Secretary	

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance	at Time Appli	cation is	Filed:
Month	FCD	Year	2010

Assets:

Assets.	
Cash	5,000
Receivables	1
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	30.000
Garage Equipment (Net)	
Machinery and Tools (Net)	
Supplies on Hand	5000
Prepaids and Other Assets	ø
Total Assets	35,000
Liabilities and Equity:	
Accounts Payable	
Notes Payable	20.000
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	
Total Liabilities	<i>70,000</i>
Capital Stock	
Retained Earnings	
Total Equity	
Total Liabilities and Equity	15.000
2 of	- 7

PROPOSED RATES AND CHARGES FOR SERVICE

Maximum Proposed Rates and Charges for Service are as follows:
300 per hour
1 00 per nour
Counties to be Served:
Statewide
Maximum Number of Passengers per Vehicle: 15

DESCRIPTION OF EQUIPMENT

					WEIGHT	SEATING
MAKE	YEAR	& MODEL	VIN#		EMPTY	CAPACITY
line	~ 1	2001	ILIFMQ	1 W 7	114650108	330016 11
<u> </u>	<u> </u>				1 1 1 1 2 2 2 2 2 2	
1						
						
1						

INSURANCE QUOTE

This form MUST BE COMPLETED AND SIGNED by an AUTHORIZED INSURANCE COMPANY REPRESENTATIVE
The following insurance quote is for:
Gorby's of Mystle Beach LLC dba Platinum Limousir
100 Red Wolf Trail Myrtle Beach, SC 29579 Address of Motor Carrier
Amount of Premium: Limits Quoted: (See Below)
Liability Insurance \$ 1313° Limits $25/100/25$
The above quoted premium is for a term of months.
Minimum Limits - Intrastate Only: 1-7 Passengers \$ 25,000/50,000/25,000 8-15 Passengers \$ 25,000/100,000/25,000
CORNHOSKER CASAULTY COMPANY Name of Insurance Company
9290 WEST DODGE Rd Ste 300, OMAHA Home Office Address of Company NE 6-2114
I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.
2/20/10 Robby Wein Authorized Insurance Company Representative's Signature

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

Exhibit FWA

Gorby's of Myrtle Beach, LLC dba Platinum Limousine

1.		outstanding judgments against the Applicant?
	O Yes	® No
	If Yes, indicate nature of	of judgement(s) against applicant.
2.	Is Applicant familiar wit carrier operations in Sou statutes and regulations?	h all statutes and regulations, including safety regulations and governing for-hire motor th South Carolina, and does Applicant agree to operate in compliance with these
	Yes	○ No
3.	Is Applicant aware of the therewith?	Commission's insurance requirements and the insurance premium costs associated
	Yes	○ No

Exhibit on Driver Qualifications

1.	Applican	nt understands that al	ll dr	ivers must be a minimum of 18 years of age.
	6 Y	es	0	No
2.	and such	nt understands that a record from the DM tained in the Applica	IV (ified copy of the driver's three (3) year driving record issued by the SC DMV of the state in which the driver is or has been domiciled for such period must business office.
	Y		0	
3.	Applican	nt understands that a maintained in the A	cris ppli	ninal history background check from the state where the driver currently lives cant's business office.
	③ Y			No
4.	their pos	nt understands that a ssession when operates residence of the driv	ting	ivers operating a vehicle under a Class C Charter Certificate must have in a charter vehicle, a valid driver's license issued by the SC DMV or the current
	® Y			No
5.	vehicles	s to drivers who are r	regis	lass C Charter Certificate holders are prohibited from employing or leasing stered, or required to be registered, as sex offenders with the South Carolina or any national registry of sex offenders.
	③ Y	(es	0	No

p.8

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STATE OF SOUTH CAROLINA

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA POST OFFICE DRAWER 11649 COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

)

COUNTY OF Horry ; Corbys of Myrtle Beach, UC dba Platinu Applicant's Signature unous in
I, Hasie Gorby, President Name of Applicant's Representative, President
of Gorby's of Myrtle Brach, LC dha Platinum Limousine, Applicant the Applicant for the Contificate of Public Convenience and Necessity as set forth in the foregoing swear or
the Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.
Signature of Applicant/s Representative

This day of Kenned 1, 2010

Notary Public

Commission Expires

CERTIFIED TO BE A TRUE AND CORRECT
COPY AS TAKEN FROM AND COMPARED
WITH THE ORIGINAL ON FILE IN THIS OFFICE
Jain 22 2010

The House
SECRETARY OF STATE OF SOUTH CAROLINA



STATE OF SOUTH CAROLINA SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR A LIMITED LIABILITY COMPANY

The undersigned delivers the following articles of organization to form a South Carolina limited liability company pursuant to Sections 33-44-202 and 33-44-203 of the South Carolina Code of Laws, as amended.

The	address of the initial designated off	ice of the Limited Liability Company in South Carolina is
	REDWOLF TRL	to of the Ellined Ediblity Company in Count Carolina is
	Address	
MYR	TLE BEACH SC	295795206
City		Zip Code
	initial agent for service of process of	• • •
ROG	ER GORBY	Electronically filed on SCBCS
Name		Signature not required. Signature
		a for this initial agent for service of process is
100	REDWOTE TRI	
	REDWOLF TRL Address	
Street		295795206
Street	Address	295795206 Zip Code
Street MYR City	Address TLE BEACH SC	Zip Code
Street MYR City	Address	Zip Code
Street MYR City	Address TLE BEACH SC	Zip Code
Street MYR City	Address TLE BEACH SC name and address of each organization	Zip Code
Street MYR City	Address TLE BEACH SC name and address of each organizations of the second seco	Zip Code
Street MYR City	Address TLE BEACH SC name and address of each organization of the second secon	Zip Code
Street MYR City	Address TLE BEACH SC name and address of each organization of the second secon	Zip Code

Date 2010-01-20

p.11

	GORBYS OF MYRTLE BEACH LLC Name of Corporation	
5 .	Check this box if the company is to be a term company. If so, provide the term specified:	
6.	Check this box only if management of the limited liability company is vested in a manager or managers. If this company is to be managed by managers, specify the name and address of each initial manager:	
7.	Check this box if one or more of the members of the company are to be liable for its debts and obligations under section 33-44-303(c). If one or more members are so liable, specify which members, and for which debts, obligations or liabilities such members are liable in their capacity as members.	
8.	Unless a delayed effective date is specified, these articles will be effective when endorsed for filing by the Secretary of State. Specify any delayed effective date and time:	
9.	Set forth any other provisions not inconsistent with law which the organizers determine to include, including any provisions that are required or are permitted to be set forth in the limited liability company operating agreement.	
10.	Signature of each organizer	

Electronically filed on SCBOS.
Refer to attached signature page.

Jan 22 10 11:46a

gorby

843-903-2803

p.2

Signature Page Attachment to South Carolina Business One Stop (SCBOS) For The State of South Carolina Secretary of State

This page must be completed, scanned and submitted as an attachment when filing on SCBOS.

Attach additional pages as needed.

Type of Filing: ARTICLES OF ORGANIZATION (Limited Liability Company)

GOF his	of Mystle Brack
Signature of Each Organizer:	Loss Spil
Name	Signature
1-22 - 2010 Date	
Name	Signature
Date	•
Name	Signature
Date	
Name	Signature
Date	

Fax or e-mail your completed forms to:
SC Secretary of State
(803) 734-1610
SCSOS1@InfoAve.Net
(Please e-mail signature forms in the following file formats only:
Adobs .PDF, .GIF, or .JPEG extensions.)

Feb 25 10 04:41p gorby 843-903-2803 p.13

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

GORBYS OF MYRTLE BEACH LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on January 20th, 2010, with a duration that is at will, has as of this date filed all reports due this office, including its most recent annual report as required by section 33-44-211, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed a certificate of cancellation as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 22nd day of January, 2010

Mark Hamman Q

Mark Hammond, Secretary of State